

# BEST AVAILABLE COPY

<b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET</b> (FOR USE WITH FORM PTO-875)							SERIAL NO. <b>09/623895</b>		FILING DATE <b>16 NOV 2000</b>		
							APPLICANT(S) <i>Peller</i>				
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*	
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TOTAL CLAIMS	5		5				TOTAL CLAIMS				